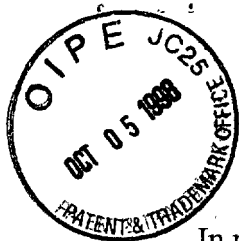


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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE



Patent
228/040

K. Ward
10/10/98
#20 Reg. fr
EAF
n/lee

In re the Application of:

Ronald A. Katz

Serial No.: 08/485,113

Filed: June 7, 1996

For: MULTIPLE FORMAT TELEPHONIC
INTERFACE CONTROL SYSTEM

Group Art Unit: 2743

Examiner: S. Woo

98 OCT -9 AM 7:10
GROUP 2700

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Assistant Commissioner for Patents
Washington, D.C. 20231

**RESPONSE UNDER 37 CFR § 1.116
EXPEDITED PROCEDURE
EXAMINING GROUP**

AMENDMENT OR RESPONSE AFTER FINAL REJECTION — TRANSMITTAL

Transmitted herewith is an amendment after final rejection (37 CFR § 1.116) for this application.

- ☐ "Small Entity Status" of this application under 37 CFR §§ 1.9 and 1.27 has been established by a Verified Statement previously submitted.
- ☒ Applicant(s) petitions for an extension of time under 37 CFR § 1.136 [fees: 37 CFR § 1.17(a)(1)-(5)] for the total number of months checked below:

EXTENSION (months)	FEE FOR SMALL ENTITY	FEE FOR OTHER THAN SMALL ENTITY
<input type="checkbox"/> one month	\$55.00	\$110.00
<input type="checkbox"/> two months	\$195.00	\$390.00
<input checked="" type="checkbox"/> three months	\$465.00	\$930.00
<input type="checkbox"/> four months	\$735.00	\$1,470.00
<input type="checkbox"/> five months	\$1,030.00	\$2,060.00
930.00 00		Fee \$930.00

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OC-12248.1

CERTIFICATE OF MAILING
(37 C.F.R. § 1.8a)

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as First Class Mail in an envelope addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.

September 30, 1998
Date of Deposit

Denise N. Doss

Name of Person Mailing Paper

Signature of Person Mailing Paper

RECEIVED NOT IN THE RECORD
By: [Signature]
Primary Examiner
10/10/98
Mark, Group 260

If an additional extension of time is required, please consider this a petition therefor.

FEES FOR CLAIMS:

The fees for claims (37 CFR § 1.16(b)-(d)) have been calculated as shown below:

Total Claims	70	-	20	=	50	x	\$22.00	\$1100.00
Independent Claims	4	-	4	=	0	x	\$82.00	\$0.00
Multiple Dependent Claims	\$270	(if applicable)					<input type="checkbox"/>	\$0.00
TOTAL OF ABOVE CALCULATIONS								\$1100.00
Reduction by ½ for Filing by Small Entity. Note 37 CFR §§ 1.9, 1.27, 1.28.								\$0.00
If applicable, Verified Statement must be attached.								<input type="checkbox"/>
TOTAL FEES FOR CLAIMS SUBMITTED HERewith								\$1100.00

- ☒ The requisite fee pursuant to Rule 1.129 in the amount of **\$790.00** is also included in the attached check.
- ☒ A check in the amount of **\$2,820.00** is enclosed to cover the above fee(s).
- ☐ Charge Deposit Account No. **12-2475** in the amount of _____.
- ☒ The Commissioner is authorized to charge Lyon & Lyon's Deposit Account No. **12-2475** for any fees required that are not covered, in whole or in part, by a check enclosed herewith and to credit any overpayments to said Deposit Account **12-2475**.

Respectfully submitted,

LYON & LYON LLP

Dated: September 30, 1998

By: David B. Murphy

David B. Murphy
Reg. No. 31,125

DBM/dnd
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